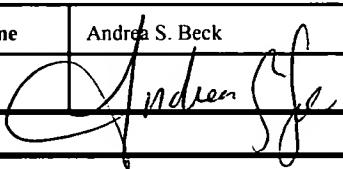
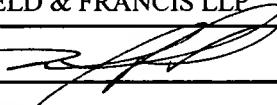


FEB 16 14/00

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231			
Typed or Printed Name	Andrea S. Beck		
Signature		Date	January 20, 2000

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> 	Attorney Docket	SUN-155P
	First Named Inventor	Alan F. Schatzberg
	Application Number	09/244,457 <i>FER 03 2000</i>
	Filing Date	February 4, 1999
	Group Art Unit	1614 <i>TECH CENTER 1600/2000</i>
	Examiner Name	W. Jarvis
	Title	<i>Methods for Treating Psychosis.....</i>

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement, 1449 and <u>22</u> references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Issue Fee Transmittal (<i>with copy of PTOL-85B</i>) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Revocation <input type="checkbox"/> Associate <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (<i>please identify below</i>): <u>Return Postcard</u> <u>Check for \$240.00</u> <u>Exhibits 1-4</u> <u>132 Declaration</u>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Individual Name	Bret Field	Registration No.	37,620
Firm Name	BOZICEVIC, FIELD & FRANCIS LLP		
Signature			
Date	1.20.00 <i>FEB 03 2000</i>		